

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 17, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90144 025 \*\*\*150.00

**DOCUMENT # 831139**  
 1. Entity Name  
**MILLIMAN & ROBERTSON, INC.**

|   |   |
|---|---|
| Principal Place of Business<br>1301 FIFTH AVENUE<br>SUITE 3800<br>SEATTLE WA 98101-2605 | Mailing Address<br>1301 FIFTH AVENUE<br>SUITE 3800<br>SEATTLE WA 98101-2605 |
|---|---|



DO NOT WRITE IN THIS SPACE

|   |   |
|---|---|
| 2. Principal Place of Business<br>Suite, Apt. #, etc. | 3. Mailing Address<br>Suite, Apt. #, etc. |
|---|---|

|              |              |                                 |  |
|--------------|--------------|---------------------------------|--|
| City & State | City & State | 4. FEI Number <b>91-0675641</b> | Applied For<br><input type="checkbox"/> Not Applicable |
| Zip          | Country      | Zip                             | Country  |

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND RD.**  
**PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  
 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

|  |   |                                 |
|--|---|---------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PD</b><br><b>COLLETT, ROBERT L</b><br><b>1301 FIFTH AVE., STE. 3800</b><br><b>SEATTLE WA 98101-2605</b>          | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>CD</b><br><b>MCCARTHY, DANIEL J</b><br><b>TWO PENNSYLVANIA PLAZA, STE. 1552</b><br><b>NEW YORK NY 10121-0088</b> | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>T</b><br><b>PEDERSEN, WILLIAM S</b><br><b>1301 FIFTH AVE., STE. 3800</b><br><b>SEATTLE WA 98101-2605</b>         | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>CS</b><br><b>POLLACK, BRIAN S</b><br><b>1301 FIFTH AVE., STE. 3800</b><br><b>SEATTLE WA 98101-2605</b>           | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete |

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>SEE Attached</b>                            |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bill Pedersen **4/11/01** **(206)504-5574**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment

Doc. # 831139  
743526

## MILLIMAN &amp; ROBERTSON DIRECTORS &amp; OFFICERS

| <u>TITLE</u>                       | <u>NAME</u>         | <u>BUSINESS ADDRESS</u>                                      | <u>HOME ADDRESS</u>                                       |
|------------------------------------|---------------------|--|---|
| * Chief Financial Officer          | John F. Clearman    | 1301 Fifth Avenue, Suite 3800<br>Seattle, WA 98101-2605      | 4817 Lake Wash. Blvd. NE<br>Unit #2<br>Kirkland, WA 98033 |
| President, CEO &<br>Director       | Robert L. Collett   | 1301 Fifth Ave., Suite 3800<br>Seattle, WA 98101-2605        | 130 Overlake Dr. E.<br>Medina, WA 98039                   |
| National Director,<br>Pension      | Thomas K. Custis    | 15800 Bluemound Rd., #400<br>Brookfield, WI 53005-6069       | 803 Knollwood Court<br>Waukesha, WI 53188                 |
| President-elect, COO &<br>Director | Patrick J. Grannan  | 259 N. Radnor-Chester Rd.<br>#300<br>Radnor, PA 19087-5260   | 285 Stonegate Drive<br>Devon, PA 19333                    |
| Director                           | Mark O. Johnson     | 111 SW Fifth Ave., Suite 2900<br>Portland, OR 97201-3690     | 1336 NW Benfield Drive<br>Portland, OR 97229              |
| National Director,<br>Casualty     | Gary R. Josephson   | 15800 Bluemound Rd., #400<br>Brookfield, WI 53005-6069       | 1920 Sunnyside<br>Waukesha, WI 53186                      |
| Director                           | Timothy D. Lee      | 333 Clay Street, Suite 4330<br>Houston, TX 77002-7338        | 1622 Scenic Shores Dr.<br>Kingwood, TX 77345              |
| Director                           | Edward P. Mohoric   | 259 N. Radnor-Chester Rd.<br>#300<br>Radnor, PA 19087-5260   | 532 Brandymede Place<br>Rosemont, PA 19010                |
| National Director,<br>Health       | Thomas G. Nelson    | 55 W. Monroe Street, 40th Floor<br>Chicago, IL 60603-5011    | 820 N. Waiola<br>Lagrange Park, IL 60526                  |
| * Treasurer & Controller           | William S. Pedersen | 1301 Fifth Ave., Suite 3800<br>Seattle, WA 98101-2605        | 2621 234th Avenue NE<br>Redmond, WA 98053                 |
| Director                           | Godfrey Perrott     | 289 Edgewater Drive<br>Wakefield, MA 01880-6215              | 63 Lothrop Street<br>Beverly, MA 01915                    |
| * Corporate Secretary              | Brian S. Pollack    | 1301 Fifth Ave., Suite 3800<br>Seattle, WA 98101-2605        | 8677 Battle Pt. Drive NE<br>Bainbridge Is., WA 98110      |
| Director                           | Joy A. Schwartzman  | One Penn Plaza, 38 <sup>th</sup> Floor<br>New York, NY 10119 | 62 Nottingham Road<br>Short Hills, NJ 07078               |
| Chairman                           | Bradley M. Smith    | 9400 N Ctl Expressway, #1000<br>Dallas, TX 75231-5030        | 8626 Vista View<br>Dallas, TX 75243                       |
| National Director,<br>Life         | Bruce W. Winterhof  | 55 W. Monroe Street, 40th Floor<br>Chicago, IL 60603-5011    | 701 Taft Rd.<br>Hinsdale, IL 60521                        |

\*Officer  
5/10/2000